

# **Frequently Asked Questions**

#### We hope this will answer some questions you may have about sexually transmitted infection (STI) testing.

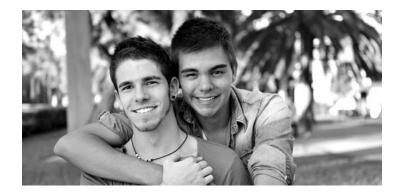
- Q Where can I go for testing?
- A. To a doctor or nurse practitioner in a medical clinic. You can get tested at Campus Health and the record of the services you received will NOT show up on your Bursar's statement. This means nobody has to know you got tested unless you tell them.
- **Q.** I just want to get checked out to be sure I'm O.K. Can I be tested for everything?
- A. Yes, you could be tested for everything, but it would mean tests for over 25 different organisms and be very expensive! Sexually transmitted infections are caused by a variety of organisms in four categories: bacterial, viral, fungal, and parasitic. The screening test for HPV is different than the urine test to look for chlamydia and gonorrhea. Each infection has a set of specific symptoms. Your medical provider will discuss any signs or symptoms you (or your partner) may have, review your sexual health history, and recommend which tests to consider based on your circumstances.
- **Q.** I had some blood tests done when I had a physical last year. Did they test me for STIs?
- A. No. If you didn't discuss STI testing, it didn't happen.

- **Q.** If I have an infection and my partner doesn't have anything wrong with them, where did I get it?
- A. Sometimes that question is impossible to answer, especially if you have had more than one sexual contact in your life. Some infections, particularly viral ones, may take months to show signs. It's possible to transmit an infection without knowing anything is wrong. If either of you slept with someone else (even over a year ago), one of you may have brought an infection into your relationship. The diagnosis of an STI may be emotionally difficult and result in blame or mistrust between partners. If you feel safe, telling your partner your diagnosis or STI status is always best, and can keep a difficult situation from getting worse.
- **Q.** Will my parents or partner find out if I'm tested for STIs?
- **A.** Not unless you tell them yourself. We do everything possible to protect your medical confidentiality. Your medical record cannot be released without your written consent. If you bill your charges to your Bursar's account, the bill simply states "Student Health charges" on the statement. Nowhere does it give any details about your visit to Campus Health. Insurance companies may share specifics in an explanation of benefits (EOB).

- **Q.** What are the top 3 STIs at the UA?
- A. Human Papilloma Virus (HPV/genital warts)
  - Chlamydia
  - Genital Herpes

Approximately 2 of every 3 people who acquire STIs are under the age of 25. Campus Health sees thousands of students each year for STI testing, diagnosis and treatment. If you have an infection, you will receive experienced care and treatment.

- **Q.** I am a virgin. How could I get an STI?
- **A.** Some infections can be spread by touching. Penetration isn't necessary. If you had skin-to-skin contact anywhere on the body, you might get something, particularly herpes, molluscum contagiosum, or genital warts. Oral sex can spread STIs too.



- **Q.** Where can I buy good condoms that aren't expensive?
- **A.** The Campus Health Pharmacy has a large selection of condoms for sale. You can buy condoms by the 3, 6, or 12 pack, or cost-saving 100 pack. Also for sale: water-based lubricants, latex dams, contraceptive products, and non-latex condoms.

# Potential Complications of Untreated STIs

It is important to seek testing and treatment for STIs. If untreated, serious complications can occur. These may range from secondary infections to infertility to cancers. Bacterial infections in women may lead to fallopian tube scarring and pelvic inflammatory disease, which

both increase the risk of tubal pregnancy. Other infections can lead to chronic pain, severe neurological damage, birth defects, liver failure, and death. Having an STI can put you at risk of other STIs, including HIV.

# **Reducing Risks**

To reduce your risks, abstain from any sexual contact (even touching without penetration). Many STIs, including HPV, herpes, and molluscum, can be spread through touching, massage, and mutual masturbation. The good news is that you can lower your risks if you're sexually active in the following ways:

**Limit your number of partners.** With each additional partner you raise your chance of acquiring an STI. Be Smart. It's your choice who, and how many people, you sleep with. Use strategies to lower your risks if you have multiple partners.

Barrier methods, condoms, and latex (dental) dams can reduce transmission. Use condoms made of latex or polyurethane (not natural or "sheep skin" condoms). While condoms do not provide 100 percent protection, next to abstinence, they are the best protection available.

Get tested regularly. Include STI testing as part of your regular medical check-up, especially if you have any new partner(s).

Learn about your body and be aware of changes. Know the symptoms of STIs. Seek medical help if you have any doubts about a sign or symptom. Condoms and spermicides with nonoxynol-9 may increase your risk of acquiring HIV infection, especially in women who use it several times a day.

If you notice a change in your body, get it checked out. Watch for these signs:

- Painful sores • Pain
- Itching

Redness

- Unusual discharge
- Unusual odor
- Painful urination Bumps

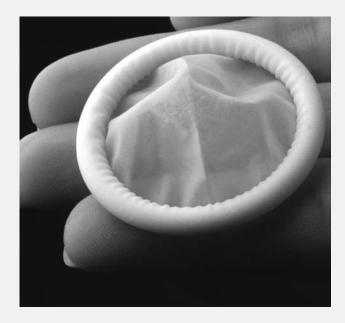
**Communicate openly with your partner.** Talk about getting tested, sexual health and prevention, sexual activities outside of your relationship, trust, and honesty. Try having these conversations before you start having sex with someone. The more you trust each other to be open in your communication, the less likely it is that either of you will bring an STI into the bedroom.

Avoid alcohol and drugs. If you drink too much or do drugs before having sex, you are more likely to do something risky (like not use protection or sleep with someone you just met).

Know your personal boundaries, before you find yourself in an uncomfortable situation, so you know how to react. Decide what risks you are, or are not, willing to take. This could mean never having sex without a condom, never having sex with someone you don't know, communication about STI testing before having sex, etc.

# **STI Checklist**

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| Chlamydia (Chlamydia trachomatis) 6               |  |
|---|--|
| Gonorrhea (Neisseria gonorrhea)7                  |  |
| HPV (Human Papilloma Virus) on the cervix         |  |
| HPV (Human Papilloma Virus) on the skin           |  |
| External Genital Warts (Condyloma)9               |  |
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| Non-gonococcal Urethritis (NGU) 11                |  |
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| Infectious Agent  | Transmission   | Symptoms  | Testing Time                 | How tested? | Treatment   | Prevention        |
|---|--|---|------------------------------|-------------|---|-------------------|
| <b>Chlamydia</b><br>Chlamydia trachomatis<br>(bacteria) | Body Fluids –<br>contact of mucous<br>membranes (cervix,<br>urethra, mouth)<br>with infected<br>person's fluids<br>(semen, mucus).<br>Transmission<br>common with<br>exposure through<br>vaginal or<br>anal sex. | <ul> <li>1-3 weeks after<br/>exposure.</li> <li>Most people<br/>have no<br/>symptoms.</li> <li>Dull, aching<br/>pain or heavy<br/>feeling in pelvic<br/>area, pain with<br/>urination or<br/>intercourse,<br/>cervical or anal<br/>discharge, sore<br/>throat. Urethral<br/>discharge, anal<br/>itching or<br/>discharge,<br/>swelling in<br/>the testicles<br/>or bleeding<br/>after sex.</li> </ul> | 7-14 days after<br>exposure. | year usua   | A number of<br>antibiotics are<br>effective.<br>All partners<br>should be<br>examined<br>and treated.<br>Do not have<br>vaginal, anal,<br>or oral sex until<br>1 week after<br>you and your<br>partner(s) have<br>completed<br>treatment.<br>A students who<br>ercourse in the<br>lly or always u | le past<br>used a |
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| Infectious Agent                                      | Transmission   | Symptoms   | Testing Time                               | How tested? | Treatment   | Prevention- |
|---|--|--|--|-------------|---|-------------|
| <b>Gonorrhea</b><br>Neisseria gonorrhea<br>(bacteria) | Body Fluids –<br>contact of mucous<br>membranes (cervix,<br>anus, throat,<br>urethra) with<br>infected person's<br>fluids (semen,<br>mucus). | 2-10 days after<br>exposure.<br>Some people<br>have no<br>symptoms.<br>May have pain<br>or burning<br>with urination,<br>vaginal, anal or<br>penile discharge,<br>bleeding<br>between<br>menstrual<br>periods, and/or<br>sore throat.<br>Males are<br>more likely<br>than females to<br>have symptoms. | Approximately<br>7 days after<br>exposure. | U U         | A number<br>of antibiotics<br>are effective,<br>although some<br>strains are<br>antibiotic-<br>resistant.<br>All partners<br>should be<br>examined<br>and treated.<br>Do not have<br>vaginal, anal, or<br>oral sex until 1<br>week after you<br>and your<br>partner(s) have<br>completed<br>treatment.<br><b>students hav</b><br>al intercourse |             |
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| Infectious Agent  | Transmission   | Symptoms  | Testing Time  | How tested?   | Treatment   | Prevention  |  |  |
|---|--|---|---|---|---|---|--|--|
| <b>HPV</b><br>(Human Papilloma<br>Virus) on the cervix,<br>penis, or anus   | HPV is passed on<br>through genital<br>contact during<br>vaginal, anal, and<br>oral sex.<br>HPV can be spread<br>without penetrative<br>intercourse. It can<br>be spread without<br>visible lesions. | Usually no<br>symptoms.<br>Pap test can<br>reveal dysplasia<br>(unusual cells).<br>Lesions on the<br>cervix can be<br>evaluated by a<br>special procedure<br>called colposcopy. | Weeks to years<br>after exposure.<br>For women, Pap<br>testing is<br>recommended<br>every three<br>years, beginning<br>at age 21. | A Pap test<br>can screen for<br>cellular changes<br>on the cervix,<br>penis, or anus,<br>caused by HPV.<br>HPV is not<br>routinely tested<br>for in people<br>under age 30. | In most cases,<br>no treatment<br>is necessary,<br>as the body's<br>immune system<br>clears the<br>HPV infection<br>over time.<br>Options:<br>Cryotherapy<br>(freezing), laser<br>surgery, or a<br>LEEP (loop<br>electrosurgical<br>excision<br>procedure). | Condoms for<br>vaginal, oral,<br>and anal sex<br>can reduce<br>transmission.<br>Vaccination with<br>an HPV vaccine,<br>such as Gardasil®<br>9, prevents most,<br>but not all,<br>HPV infection.<br>HPV vaccination<br>(see below)<br>can prevent<br>many cancers. |  |  |
| <b>Have you gotten the cancer-preventing HPV vaccine?</b><br>All people ages 9-45 can get the HPV vaccine, Gardasil <sup>®</sup> 9. This vaccine has proven highly effective in preventing genital warts and cancers of the cervix, anus, penis, and mouth, caused by 9 strains of HPV. Most insurers cover the cost. If you already recieved the original vaccine, check with your doctor about getting Gardasil <sup>®</sup> 9. |  |   |   |   |   |   |  |  |

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| Infectious Agent  | Transmission  | Symptoms   | Testing Time                   | How tested?   | Treatment  | Prevention  |
|---|---|--|--------------------------------|---|--|---|
| External<br>Genital Warts*<br>(condolyma)<br>*Caused by HPV | Skin to skin<br>contact. Touching<br>an infected<br>person's skin,<br>lesions, or genital<br>secretions can<br>transmit cells<br>containing the<br>virus. HPV can be<br>spread without<br>penetrative<br>intercourse. It can<br>be spread without<br>visible lesions. | Lesions on the<br>skin can be<br>either papillary<br>(standing up<br>from the skin) or<br>flat. Often rough<br>or "cauliflower-<br>like" in texture.<br>Usually not<br>painful, but<br>external lesions<br>(bumps, warts)<br>may itch. | Weeks to years<br>of exposure. | There is no<br>routine test for<br>genital warts<br>at this time.<br>A medical<br>provider will<br>visually observe<br>symptoms<br>(lesions) if<br>present. | There are<br>many options<br>depending on<br>site and severity<br>for external<br>warts: Aldara<br>cream (Rx),<br>laser surgery,<br>freezing with<br>liquid nitrogen,<br>tricloracetic<br>acid (TCA),<br>and interferon. | Total absence<br>of skin-to-skin<br>contact is the<br>only way to avoid<br>transmission.<br>Condoms and latex<br>dams are only<br>partially protective<br>since they<br>don't cover all<br>exposed areas.<br>Vaccination with<br>the HPV vaccine<br>Gardasil® 9 can<br>prevent 90%<br>of genital warts. |
|   | he Campus Healt<br>ubricants, sperm<br>ormonal contrac  | icides, pregnan  | icy tests, emerg               | gency contrace  | ption, diaphrag  |   |
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| Infectious Agent  | Transmission   | Symptoms   | Testing Time  | How tested? | Treatment  | Prevention |
|---|--|--|---|-------------|--|------------|
| Herpes<br>Simplex Virus<br>(HSV)<br>both types I and II | Skin to skin<br>contact. Touching<br>an infected<br>person's lesions<br>can transmit cells<br>containing the<br>virus (oral/oral,<br>oral/genital,<br>hand/genital, or<br>genital/genital).<br>Can be spread<br>without penetrative<br>intercourse or<br>visible lesions.<br>Having HSV<br>increases the<br>risk of becoming<br>infected with<br>other STIs. | Fluid-filled<br>blisters on skin.<br>Blisters may<br>rupture, leaving<br>painful, shallow<br>ulcers. They<br>heal in about<br>12 days. | Culture of<br>lesions: 2-12<br>days after<br>exposure.<br>Blood test: 2-3<br>months after<br>exposure.<br>Blood test can<br>tell you if you<br>have ever been<br>infected with<br>HSV. It cannot<br>tell you:<br>• At what site<br>you were<br>infected<br>• When or if you<br>are contagious<br>• When you<br>contracted HSV |             | If treated<br>immediately,<br>antiviral<br>medications<br>can help<br>decrease the<br>severity and<br>length of an<br>outbreak. Topical<br>anesthetic cream<br>is helpful.<br>For recurring<br>outbreaks,<br>medication can<br>greatly decrease<br>the frequency<br>and severity of<br>outbreaks, as<br>well as decrease<br>risk of<br>transmission. | -          |
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| Infectious Agent   | Transmission  | Symptoms   | Testing Time                      | How tested?   | Treatment  | Prevention   |
|--|---|--|-----------------------------------|---|--|--|
| Non-gonococcal<br>Urethritis (NGU)<br>This is a condition<br>involving the urethra<br>(tube that carries<br>urine).<br>NGU is often diagnosed<br>when gonorrhea and<br>chlamydia have been<br>ruled out. | Body fluids –<br>contact of mucous<br>membranes with<br>infected person's<br>genital secretions.<br>Transmission<br>usually occurs<br>through vaginal<br>or anal sex. | Sometimes has<br>no symptoms.<br>May have painful<br>and frequent<br>urination,<br>possibly a<br>discharge, or<br>no symptoms<br>at all. | 7-14 days<br>after exposure.      | Discharge can be<br>examined under<br>microscope.<br>Possible urine<br>test to rule out<br>gonorrhea and/or<br>chlamydia. | A number of<br>antibiotics are<br>effective.<br>All partners<br>should be<br>examined and<br>treated.<br>Do not have sex<br>until you and<br>your partner(s)<br>have completed<br>treatment. | Condoms for<br>vaginal, oral,<br>and anal sex<br>can reduce<br>transmission. |
| iactoid i  | 14% of sexua<br>n the last yea  | Illy active U<br>ar. (2021 Health an   | A students<br>ad Wellness Survey) | have not be   | en tested fo   | or STIs  |
|  |   |  |                                   |   |  |  |

| Infectious Agent   | Transmission   | Symptoms  | Testing Time                 | How tested?  | Treatment   | Prevention   |
|--|--|---|------------------------------|--|---|--|
| <b>Trichomoniasis</b><br>Trichomonas vaginalis<br>This usually affects the<br>vagina and can also<br>affect the penis. | Body Fluids –<br>contact of mucous<br>membranes<br>(cervix, urethra)<br>with infected<br>person's fluids.<br>Transmission<br>usually occurs<br>through<br>vaginal sex. | Greenish-<br>yellowish<br>discharge with<br>bad odor. | 4-20 days<br>after exposure. | Vaginal<br>secretions are<br>examined under<br>a microscope or<br>detected in<br>urinalysis. | Antibiotics.<br>Partner(s)<br>should be<br>examined<br>and treated.<br>Do not have sex<br>until you and<br>your partner(s)<br>have completed<br>treatment.<br>Re-screening<br>is strongly<br>recommended. | Condoms for<br>vaginal, oral,<br>and anal sex<br>can reduce<br>transmission. |
|  | <b>Consistent and corr</b><br>J.S. Centers for Disease (   |   |                              | s the best protec  | tion against STIs   | and HIV.   |
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| Infectious Agent                      | Transmission   | Symptoms   | Testing Time   | How tested?   | Treatment   | Prevention   |
|---------------------------------------|--|--|--|---|---|--|
| <b>Syphilis</b><br>Treponema pallidum | Sexual contact or<br>direct contact with<br>a syphilis sore.<br>Some risk of<br>mother to infant<br>transmission.<br>Having syphilis<br>increases the<br>risk of becoming<br>infected with other<br>STIs, including HIV. | Occurs in stages<br>and may progress<br>from a painless,<br>open sore (chancre)<br>to a rash. In later<br>stages, cardio-<br>vascular, skin,<br>bone, and<br>neurological<br>infection<br>may occur. | Exam of the sore<br>10-90 days after<br>exposure.<br>Blood test<br>3 months<br>after exposure. | Blood test.<br>Examination of<br>cells from the<br>chancre in the<br>primary stage. | Appropriate<br>antibiotics are<br>effective. All<br>partners should<br>be examined<br>and treated.<br>Do not have sex<br>until you and<br>your partner(s)<br>have completed<br>treatment. | Condoms for<br>vaginal, oral,<br>and anal sex<br>can reduce<br>transmission. |

| Infectious Agent                                 | Transmission   | Symptoms  | Testing Time   | How tested?   | Treatment  | Prevention  |
|--|--|---|--|---|--|---|
| <b>HIV</b><br>Human<br>Immunodeficiency<br>Virus | Body Fluids –<br>contact of mucous<br>membranes (cervix,<br>urethra) with<br>infected person's<br>fluids (semen,<br>blood, vaginal<br>fluid, breast milk). | Early: Flu-like<br>symptoms for 2<br>weeks. No obvious<br>symptoms for a<br>few months to<br>many years. When<br>symptoms develop:<br>fevers, herpes<br>zoster, yeast infec-<br>tions. AIDS: oppor-<br>tunistic infections. | 3 12 weeks after<br>exposure.<br>Most tests<br>measure HIV<br>antibodies. About<br>97% of people<br>will develop<br>detectable<br>antibodies within<br>3-12 weeks of<br>infection. | Blood test.<br>Same day, rapid<br>blood testing<br>available at<br>Pima County<br>Health Depart-<br>ment and other<br>local agencies. | Antiviral drugs<br>and specific<br>medications for<br>complications.<br>There is no cure<br>for HIV. | Condoms for<br>vaginal, oral,<br>and anal sex<br>can reduce<br>transmission.<br>Avoid contact<br>with needles,<br>particularly<br>sharing needles<br>for injecting<br>drug use. |

| Infectious Agent                              | Transmission  | Symptoms   | Testing Time                  | How tested? | Treatment                                      | Prevention   |
|---|---|--|-------------------------------|-------------|--|--|
| <b>Hepatitis B</b><br>Hepatitis B Virus (HBV) | Bodily fluids –<br>contact of mucous<br>membranes<br>(cervix, urethra)<br>with infected<br>person's body<br>fluids (semen,<br>vaginal fluid,<br>and blood). | Fatigue, nausea,<br>and jaundice<br>(yellow skin and<br>eyes) with dark<br>urine. Some<br>people have very<br>mild symptoms<br>or no symptoms<br>at all. | 2-6 months after<br>exposure. | Blood test. | Sometimes<br>treated with<br>anti-viral drugs. | Vaccination is<br>available and<br>recommended<br>for infants,<br>adolescents, people<br>with multiple sexual<br>partners, health<br>care workers, and<br>prison guards.<br>Avoid contact with<br>blood and needles. |

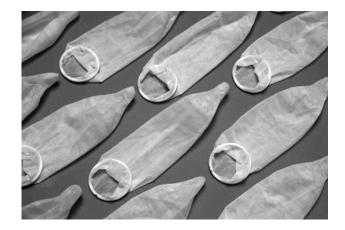
| Infectious Agent   | Transmission   | Symptoms   | Testing Time                             | How tested?  | Treatment   | Prevention   |
|--|--|--|--|--------------|---|--|
| Molluscum<br>Contagiosum<br>(a member of the<br>pox virus group) | Skin to skin<br>contact can<br>transmit cells<br>containing the<br>virus. Intercourse<br>is not necessary. | Small, round,<br>raised lesions<br>with shiny<br>surface. Occurs<br>on genital<br>skin, thighs,<br>abdomen, and<br>other body areas.<br>Often mistaken<br>for warts. | 1 week to<br>6 months<br>after exposure. | Visual exam. | Cryotherapy<br>(freezing with<br>liquid nitrogen).<br>Blister will form<br>and bump will<br>disappear as<br>blister heals.<br>Trichloroacetic<br>acid and<br>curettage<br>(scraping). | Total absence<br>of skin-to-skin<br>contact is the<br>only way to avoid<br>transmission. |

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### Resources

#### Campus

| UA Campus Health                                    |
|---|
| - Sexual Health Questions                           |
| - Appointments                                      |
| - Pharmacy  |
| - Counseling & Psych Services (CAPS) 520.621.3334   |
| - Oasis Sexual Assault, Gender-Based                |
| Violence & Trauma Services 520.626.2051             |
| • ASUA Pride Alliance 520.621.7585                  |
| • Women & Gender Resource Center 520.621.4498       |
| Local   |
| • Southern Arizona AIDS Foundation 520.628.7223     |
| Planned Parenthood of Southern Arizona 520.408.PLAN |
| <ul> <li>Pima County Health Department</li> </ul>   |
| Theresa Lee Center (STI testing) 520.724.7900       |
| <ul> <li>Southern Arizona Center Against</li> </ul> |
| Sexual Assault (SACASA)                             |
| <u>National</u>                                     |
| • HIV Hotline                                       |
| • STI Hotline                                       |
| • Emergency Contraception                           |



#### **Websites**

All Health Topics: health.arizona.edu goaskalice.com

STIs: ashastd.org npin.cdc.gov

LGBTQ: pride.asua.arizona.edu SAAF.org Family Planning: plannedparenthood.org azsafebabyhaven.org

• (If you have delivered a baby and cannot keep it, they will receive the baby and find a safe, permanent home. You can remain anonymous.)



### CAMPUS HEALTH HEALTH.ARIZONA.EDU

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SPRING 2022

# Wherever you are ...we're here for you.

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### VIRTUAL/IN-PERSON

- COVID-19
- Counseling (CAPS)
- General Medicine
- Immunization & Travel Clinic
- Lab/X-Ray
- LGBTQ+ Health
- Nutrition
- Pharmacy
- Physical Therapy
- Sports Medicine
- Women's Health ... and more!

MEDICAL: (520) 621-9202 AFTER HOURS: (520) 570-7898 CAPS 24/7: (520) 621-3334



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